

STATE OF KANSAS
STATE CORPORATION COMMISSION
200 Colorado Derby Building
Wichita, Kansas 67202

WELL PLUGGING RECORD
K.A.R.-82-3-117

API NUMBER 15-101-21,656-0000

LEASE NAME Selfridge

WELL NUMBER 1

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

330 Ft. from N Section Line

990 Ft. from E Section Line

LEASE OPERATOR Shields Oil Producers, Inc.

SEC. 10 TWP. 17 RGE. 27 (X) or (W)

ADDRESS Shields Bldg., Russell, KS.

COUNTY Lane

PHONE# (913) 483-3141 OPERATORS LICENSE NO. 5184

Date Well Completed 7-4-93

Character of Well D & A

Plugging Commenced 7-4-93

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

Plugging Completed 7-4-93

The plugging proposal was approved on 7-3-93 (date)

by Steve Dyrrant (KCC District Agent's Name).

Is ACO-1 filed? Yes If not, is well log attached? _____

Producing Formation _____ Depth to Top _____ Bottom _____ T.D. 3,935'

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS

CASING RECORD

Formation	Content	From	To	Size	Put In	Pulled out
				8 5/8"	219'	Cmtd. w/150 sax

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same and depth placed, from _____ feet to _____ feet each set.
Fill hole w/heavy mud. Push bridge plug to 1,300', spot 80 sax cement on plug thru drill pipe.
Push bridge plug to 700', spot 25 sax cement on plug thru drill pipe. Push bridge plug to 240', spot 40 sax on plug thru drill pipe. Push wiper plug to 40', dump 10 sax cement on plug.
Dump 15 sax cement down rat hole and 10 sax cement down mouse hole.

(If additional description is necessary, use BACK of this form.)

Name of Plugging Contractor Shields Drilling Co. License No. 160

Address Shields Bldg., Russell, KS. 67665

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Shields Oil Producers, Inc.

STATE OF KANSAS COUNTY OF RUSSELL, ss.

Jack P. Beeman (Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well as filed that the same are true and correct, so help me God.

(Signature) Jack P. Beeman

(Address) Shields Bldg., Russell, KS. 67665

SUBSCRIBED AND SWORN TO before me this 15th day of July, 19 93

Ruth Phillips
Notary Public

My Commission Expires: _____

